

SERFF Tracking Number: ANTX-126649669 State: Arkansas  
 Filing Company: American National Life Insurance Company of Texas State Tracking Number: 45808  
 Company Tracking Number:  
 TOI: MS09 Medicare Supplement - Other 2010 Sub-TOI: MS09.000 Medicare Supplement Other 2010  
 Product Name: ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER  
 Project Name/Number: ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER/ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER

## Filing at a Glance

Company: American National Life Insurance Company of Texas

Product Name: ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER SERFF Tr Num: ANTX-126649669 State: Arkansas

TOI: MS09 Medicare Supplement - Other 2010 SERFF Status: Closed-Approved State Tr Num: 45808

Sub-TOI: MS09.000 Medicare Supplement Other 2010 Co Tr Num: State Status: Approved-Closed

Filing Type: Form

Author: Sherry Wiegman

Reviewer(s): Stephanie Fowler

Date Submitted: 05/27/2010

Disposition Date: 06/01/2010

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER

Status of Filing in Domicile:

Project Number: ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small and Large

Overall Rate Impact:

Group Market Type: Association

Filing Status Changed: 06/01/2010

Explanation for Other Group Market Type:

State Status Changed: 06/01/2010

Deemer Date:

Created By: Sherry Wiegman

Submitted By: Sherry Wiegman

Corresponding Filing Tracking Number:

Filing Description:

Dear Sir or Madam:

In accordance with the current NAIC Model Regulations and the state's adoption of "The Medicare Improvements for Patients and Providers Act (MIPPA)", please accept this letter as notification that our Company has not submitted new 2010 Medicare Supplement Plans for approval to date.

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We will no longer actively offer or solicit the Company's approved 1990 Standardized group plans in your state as of June 1, 2010. Although this letter does not constitute a formal withdrawal on our own accord, we are requesting that the State allow us a one-year grace period as outlined in the June 14, 2009 NAIC Senior Issues Task Force Members recommendation so that we may decide the future of our Company's group Medicare Supplement market.

If prior to the end of this 12 month "grace period" we have not filed 2010 Medicare Supplement forms and rates and we have not actively offered an approved Medicare Supplement group product in your state, We will provide official notice to the Department at least 30 days in advance of our intent to discontinue and withdraw.

Please contact me at the address or numbers listed should you feel additional information is needed. Thank you for your consideration.

## Company and Contact

### Filing Contact Information

Sherry Wiegman, Sr. Compliance Analyst sherry.wiegman@anico.com  
 One Moody Plaza, SSH MP, Ste. 200 281-538-4842 [Phone]  
 Galveston, TX 77550 409-766-2950 [FAX]

### Filing Company Information

American National Life Insurance Company of Texas CoCode: 71773 State of Domicile: Texas  
 One Moody Plaza, SSH MP, Ste.200 Group Code: -99 Company Type: Health Insurance  
 Galveston, TX 77550 Group Name: State ID Number:  
 (281) 538-4842 ext. [Phone] FEIN Number: 75-1016594

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## Filing Fees

Fee Required? No  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American National Life Insurance Company of	\$0.00	05/27/2010	

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Texas

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Stephanie Fowler	06/01/2010	06/01/2010

<i>SERFF Tracking Number:</i>	<i>ANTX-126649669</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American National Life Insurance Company of Texas</i>	<i>State Tracking Number:</i>	<i>45808</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>MS09 Medicare Supplement - Other 2010</i>	<i>Sub-TOI:</i>	<i>MS09.000 Medicare Supplement Other 2010</i>
<i>Product Name:</i>	<i>ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER</i>		
<i>Project Name/Number:</i>	<i>ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER/ANTEX MEDICARE SUPPLEMENT 2010 INTENT LETTER</i>		

## Disposition

Disposition Date: 06/01/2010

Implementation Date:

Status: Approved

Comment: We will allow the requested one-year grace period as outlined June 14, 2009 NAIC Senior Issues Task Force Members recommendation.

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification		
<b>Bypass Reason:</b> N/A		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Application		
<b>Bypass Reason:</b> N/A		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Health - Actuarial Justification		
<b>Bypass Reason:</b> N/A		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Outline of Coverage		
<b>Bypass Reason:</b> N/A		
<b>Comments:</b>		